

MICHIGAN DEPARTMENT OF CORRECTIONS POLICY DIRECTIVE SUBJECT SUICIDE PREVENTION	EFFECTIVE DATE 12/20/1999	NUMBER 04.06.115
	SUPERSEDES 04.06.115 (03/07/94)	
	AUTHORITY MCL 791.203	
	ACA STANDARDS 3-4245; 3-ACRS-4E-16	
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POLICY STATEMENT:

The Department shall provide services as set forth in this policy to prisoners in Correctional Facilities Administration (CFA) facilities to reduce the risk of suicide or self-injury during incarceration.

POLICY:

DEFINITIONS

- A. Direct and Continuous Observation - Continuous observation by staff, either directly or by continuous video-camera monitoring, which may be used only if staff are close enough to the prisoner to immediately respond in case of an emergency.
- B. Qualified Health Professional (QHP) - A physician, physician's assistant, psychologist, social worker, nurse practitioner, or registered nurse licensed by the State of Michigan and, if required, certified to practice within the scope of his or her training and licensure or certification.
- C. Qualified Mental Health Professional (QMHP) - A physician, psychiatrist, psychologist, social worker, registered nurse, or other health professional who is trained and experienced in the areas of mental illness or mental retardation and is licensed by the State of Michigan, and, if required, certified to practice within the scope of his/her training and licensure or certification.
- D. Self-Injurious Behavior - Self-harm or self-mutilation deliberately inflicted by such acts as puncturing, cutting, swallowing objects, head banging, and ingestion of harmful drugs, chemicals or poisons.
- E. Serious Self-Injury - Self-inflicted physical injury to one's body which requires emergent or urgent medical intervention. Examples of injuries requiring emergent medical intervention are deep lacerations with profuse bleeding, severe head injury, open chest or abdominal wounds, coma, poisoning or drug overdose, and multiple injuries. Examples of injuries requiring urgent medical intervention are back injuries, severe abdominal pain, burns over body, major bone fractures, and bleeding from any orifice.
- F. Suicidal Behavior - Written or verbal threats, acts or gestures which would cause serious self-injury and are motivated by a decision to kill oneself.

GENERAL INFORMATION

- G. There are "critical periods" during which some prisoners may be at increased risk for suicide or self-injurious behavior. Such critical periods include the initial arrival in prison, a parole denial, an additional term of incarceration, a family crisis or loss, involvement as victim or perpetrator in a traumatic critical incident, and the diagnosis of debilitating or terminal illness.
- H. All staff have a role and responsibility in the identification, referral, and management of suicidal and self-injurious behavior. The Training Section of the Office of Personnel and Labor Relations shall develop and maintain curricula materials and standards for staff training in reducing the risk of prisoner suicide or self-injurious behavior.
- I. All critical incidents involving prisoner suicide, attempted suicide and self-injurious behavior which require medical treatment shall be reported as set forth in PD 01.05.120 "Critical Incident Reporting".

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- J. The Department of Community Health Corrections Mental Health Program (CMHP) guidelines for suicide/self-injury risk assessment and interventions shall be followed by all QMHPs and QHPs when assessing level of prisoner risk for suicide or self-injury and developing management plans to address these behaviors. The assessment shall include a personal interview with the referred prisoner and review of the prisoner's health record and institutional file, and shall be completed within 24 hours after the referral unless otherwise stated in this policy.

RECEPTION FACILITY SCREENING

- K. When a prisoner is initially delivered to a reception facility, custody staff shall immediately review the Pre-Sentence Investigation (PSI) report and the Sheriff's Questionnaire. If any indications of suicidal or self-injurious behavior are noted, the prisoner shall be immediately referred to a QMHP for a suicide or self-injury risk assessment. The prisoner shall be maintained under direct and continuous observation until evaluated by a QMHP.
- L. The QMHP shall complete a suicide or self-injury risk assessment on the day of the referral and document it on the Evaluation of Suicide Risk Prisoners form (CHJ-180). If the QMHP determines the referred prisoner is at risk for suicide or self-injury, the QMHP shall develop a management plan for the prisoner as set forth in Paragraphs BB and CC of this policy.
- M. Prisoners who are not immediately referred as set forth in Paragraph K shall be routinely screened for suicide or self-injury risk on the day of arrival at a reception facility by BHCS staff, using the Suicide Prevention Screening form (CHJ-179). If the findings of this screening indicate a risk of suicidal or self-injurious behavior, the prisoner shall be referred to a QMHP for a suicide or self-injury risk assessment, which shall be completed on the day of the referral. The prisoner shall be maintained under direct and continuous observation until evaluated by a QMHP.

OBSERVATION ROOM

- N. An observation room is a designated room or cell used on a temporary basis to facilitate unrestricted visual observation and secure management of a prisoner who exhibits suicidal or self-injurious behavior. Each warden and appropriate Regional Health Administrator shall jointly ensure the establishment and availability of an adequate number of observation rooms in the facility's health care or housing area.
- O. If an observation room is located in a segregation unit, a prisoner who is placed in the room for observation shall not be classified to segregation based on the suicidal or self-injurious behavior. The prisoner may be held in an observation room located in a segregation unit without a hearing as required by PD 04.05.120 "Segregation Standards", as long as such placement is recommended by the QMHP.
- P. An observation room shall not contain structures, fixtures, or objects which would reasonably aid self-destructive or self-injurious acts. In addition, the following restrictions shall be enforced:
1. The room shall be stripped, except for a mattress. Sheets, blankets, pillows, pillow cases and towels shall not be allowed.
 2. All personal and state-issued property shall be removed from the prisoner. This includes all clothing (including shoes, shoelaces, and belts), eye glasses, prostheses, and jewelry, except a wedding band. Dentures may be retained.
 3. Staff shall issue the prisoner only a suicide prevention gown, a suicide prevention blanket, underpants, toilet paper and, if a female prisoner, a brassiere and sanitary napkins, if needed.
 4. If a prisoner uses a mattress or an item identified in number 3 to impede observation by staff or to attempt suicide or self-injury, staff shall immediately respond and remove the item. As soon as possible after doing so, staff shall take the following action:
 - a. If the item was being used to attempt suicide or self-injury, the Regional Health Administrator shall be immediately contacted by telephone to determine if the item

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should continue to be withheld or if additional items should be withheld. If the Regional Health Administrator is not available, the duty administrative officer shall be immediately contacted to determine whether the item should continue to be withheld. The duty administrative officer shall be responsible for contacting the Regional Health Administrator as soon as possible for a final determination.

- b. If the item was being used to impede observation by staff, the duty administrative officer shall be immediately contacted by telephone to determine if the item should continue to be withheld. The duty administrative officer shall notify the Regional Health Administrator of the decision as soon as possible.
- 5. Finger foods shall be provided as a substitute for regular meals, unless otherwise directed by a QMHP upon completion of the suicide or self-injury assessment.
- Q. A prisoner in an observation room shall be maintained under direct and continuous observation until evaluated by a QMHP and a management plan is developed, if required, and implemented. There shall be no out-of-cell activity except for life-threatening emergencies or as otherwise approved by the QMHP.
- R. Nursing staff shall monitor the prisoner and conduct routine nursing assessments as needed.
- S. All staff shall document in the logbook pertinent information regarding the prisoner's behavior, including statements made by the prisoner and contacts with health care.
- T. A prisoner shall remain in an observation room until observation status is discontinued by a QMHP. Generally, a prisoner shall not be continued in an observation room for more than seven days. If it is necessary for the prisoner to remain in the observation room for more than seven days, the QMHP shall document the reasons for the extended stay in the prisoner's health record and in the unit logbook.
- U. When observation status is discontinued, the prisoner shall be removed from the observation room in accordance with facility procedures.

IDENTIFICATION, REFERRAL AND ASSESSMENT

- V. If a prisoner has engaged in suicidal or self-injurious behavior and life-threatening injury has occurred, staff shall immediately respond as set forth in PD 04.06.105 "Medical Emergencies". The prisoner shall then be referred by health care staff to a QMHP for a suicide or self-injury risk assessment. If it is necessary to release the prisoner from a health care unit prior to completion of a suicide or self-injury risk assessment, the prisoner shall be placed in an observation room.
- W. If a prisoner has engaged in suicidal or self-injurious behavior which is not life-threatening but needs medical attention as soon as possible, BHCS staff shall be immediately notified. Following treatment, BHCS staff shall refer the prisoner to a QMHP for a suicide or self-injury risk assessment. If it is necessary to release the prisoner from the health care unit prior to completion of a suicide or self-injury risk assessment, the prisoner shall be placed in an observation room.
- X. If a prisoner has engaged in suicidal or self-injurious behavior which does not require medical treatment, the prisoner shall be promptly placed in an observation room.
- Y. If a prisoner in a camp engages in suicidal or self-injurious behavior, the prisoner shall receive any required medical care, and be immediately transferred to an appropriate CFA facility. Upon arrival at the CFA facility, the prisoner shall be immediately referred to a QMHP for a suicide or self-injury risk assessment. If the prisoner is not placed in a health care unit or it is necessary to release the prisoner from a health care unit prior to completion of the suicide or self-injury risk assessment, the prisoner shall be placed in an observation room.
- Z. Whenever a prisoner is placed in an observation room, staff shall immediately initiate a referral for a suicide or self-injury risk assessment by a QMHP. The Mental Health Services Referral form (CHX-212) shall be used to document the referral.

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- AA. A QMHP shall complete a suicide or self-injury risk assessment as soon as possible but no later than 24 hours after receipt of the referral, except as set forth in Paragraphs L and M. If a QMHP is not available, the suicide or self-injury risk assessment shall be completed by a QHP, with corroboration of the QHP assessment by a QMHP on the next business day.

MANAGEMENT PLAN

- BB. If indicated by the suicide or self-injury risk assessment, the QMHP shall develop a written management plan for the referred prisoner using the Mental Health Management Plan form (CHJ-177). A copy of the management plan shall be placed in the prisoner's health record.
- CC. The management plan shall address, at a minimum, all of the following:
1. Type and duration of safety precautions to be taken and recommendations, if any, for additional physical restraints to be used.
 2. Type and duration of allowed out-of-cell activity, if any.
 3. Required frequency of staff observation of the prisoner, ranging from continuous to a minimum of once per shift, depending on level of suicide risk.
 4. Types of behavior which should be observed and reported by staff.
 5. Specific actions to be taken by housing unit and BHCS staff when certain behaviors are observed.
 6. Frequency of planned prisoner contact with a QMHP and description of prisoner behaviors which require immediate notification of the QMHP.
- DD. Upon completion of the management plan, BHCS staff shall personally deliver a copy of the plan to the control center and to the unit in which the prisoner is housed. Staff shall note receipt of the management plan in appropriate logs. Housing unit staff also shall review the management plan upon receipt and note review in the housing unit log.
- EE. Upon delivery of the management plan, a QMHP shall immediately review the contents of the plan with appropriate housing unit staff, noting any special conditions required to be taken by unit staff. Housing unit staff shall note QMHP review in the housing unit log.
- FF. The housing unit staff who reviewed the plan with the QMHP shall review the management plan with other housing unit staff and the prisoner. These reviews also shall be noted in the housing unit log.
- GG. The management plan shall be reviewed by the QMHP at a frequency based on the prisoner's level of risk for suicide/self-injury. If the prisoner is at high or moderate risk and on observation status in an observation room, the management plan shall be reviewed, and revised as needed, at least every seven days. If the prisoner is at intermediate or low risk, the management plan shall be reviewed, and revised as needed, at least every 30 days. The management plan also shall be reviewed, and revised as necessary, whenever the prisoner's risk level is changed.
- HH. The control center shall maintain a master file of all currently active management plans for prisoners within the facility. A file shall be maintained in each housing unit of all currently active management plans for prisoners within that unit.
- II. When a prisoner for whom a management plan has been prepared is to be transferred to another facility, sending facility staff shall notify receiving facility staff that the prisoner requires special handling, in accordance with PD 05.01.140 "Prisoner Placement and Transfer", and shall immediately transmit a copy of the management plan by facsimile machine to receiving facility staff. Sending facility staff shall confirm receipt by telephone. In addition, the control center copy of the management plan shall be attached to the Prisoner Detail for Inter-Institution Transfer form (CAJ-959) to also alert receiving facility

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staff of the prisoner's special needs.

ADMISSION TO CMHP UNIT OR SELF-MUTILATION PREVENTION UNIT (SMPU)

- JJ. If a QMHP determines that a prisoner is at high risk for suicide or that a prisoner in active treatment with a diagnosis of major mental disorder is at high risk for serious self-injury, s/he shall refer the prisoner for admission to an in-patient unit or a crisis stabilization program unit of the CMHP, as described in PD 04.06.180 "Mental Health Services". The unit shall admit the prisoner for evaluation and treatment disposition. All transfers shall be in compliance with PD 05.01.140 "Prisoner Placement and Transfer".
- KK. If the QMHP determines that a prisoner not suffering from a major mental disorder is at high risk for serious self-injury due to manipulation, s/he shall refer the prisoner to the SMPU as set forth in PD 04.05.120 "Segregation Standards". In such cases, the self-injurious prisoner shall remain in an observation room and the QMHP shall provide CFA staff with specific management recommendations for the prisoner while the SMPU transfer is pending. The SMPU shall admit the prisoner for evaluation and program disposition.
- LL. When a prisoner admitted to a SMPU or CMHP unit for evaluation or treatment of suicide or self-injury is discharged, the following shall apply:
1. A management plan shall be developed as set forth in Paragraphs BB and CC.
 2. Sending staff shall notify receiving staff of a prisoner requiring special handling in accordance with PD 05.01.140 "Prisoner Placement and Transfer".
 3. Transportation shall be arranged so the prisoner's arrival occurs during normal business hours (Monday through Friday, 8:00 a.m. to 4:00 p.m.) In order for the local QMHP to review the discharge summary and tailor the management plan to conditions in that facility. The prisoner shall be maintained under direct and continuous observation until such review is completed and the management plan is communicated to custody staff.

OPERATING PROCEDURES

- MM. Wardens, in conjunction with the appropriate Regional Health and Mental Health Administrators, shall ensure that within 60 days of its effective date, procedures implementing this policy directive are developed and forwarded to the appropriate CFA Regional Prison Administrator and the applicable health care administrator.

AUDIT ELEMENTS

- NN. A Primary Audit Elements List has been developed and will be provided to wardens and Regional Health Administrators to assist with self audit of this policy, pursuant to PD 01.05.100 "Self Audit of Policies and Procedures".

BM:OPH:11/17/99